



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE & INSURANCE
DIVISION OF FIRE PREVENTION
ADMINISTRATIVE SERVICES SECTION
PERMITS AND LICENSES UNIT
500 JAMES ROBERTSON PARKWAY
THIRD FLOOR
NASHVILLE, TN 37243-1159

Phone: (615) 741-1322
Fax: (615) 741-1583

APPLICATION FOR FIREWORKS EXHIBITOR LICENSE

(License expires one year from date of issuance.)

(Pursuant to Title 68, Chapter 104, Tennessee Code Annotated)

LICENSE FEE: **\$1,000.00** (Checks or money orders should be made payable to the Department of Commerce and Insurance)

Print or type. All questions must be answered before the application will be processed. An incomplete application may result in non-issuance of the license.

Name of Exhibitor: _____

Mailing Address

Street: _____

City: _____ State: _____ Zip: _____ Telephone #: () _____

Business Address (if different than mailing address)

Street: _____

City: _____ State: _____ Zip: _____ Telephone #: () _____

Email address: _____ Fax #: () _____

Type of Business: ☐ Sole Proprietor ☐ Corporation ☐ Partnership ☐ Other (specify) _____

Name of Owner(s): _____ Date of Birth: ____/____/____

Identify the type(s) of display(s) performed by the business:

☐ Outdoor Display ☐ Proximate Pyrotechnic ☐ Flame Effects

Federal Tax ID/Employer Identification Number: _____

Federal Fireworks Permit Type and Number: _____

Have you been convicted of or plead guilty or nolo contendere to any state or federal felony? ☐ Yes ☐ No
If yes, provide additional information. Include (1) date, (2) charge, (3) place, (4) court, and (5) action taken.

Submit a certificate of insurance showing a general liability insurance policy in the minimum amount of one million dollars (\$1,000,000) to cover potential liability for bodily injury and property damage. The certificate must include products coverage and state that fireworks, pyrotechnics or flame effects operations are included. The Division of Fire Prevention Permits and Licensing Unit must be identified as a certificate holder.

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE FIREWORKS LAWS FOR THE STATE OF TENNESSEE. I FURTHER CERTIFY THAT ALL ANSWERS GIVEN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

DATE